

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

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FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) OREGON RIGHT TO LIFE VICTORY PAC		FEC IDENTIFICATION NUMBER ▼ C C00592303	
Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee Allied Video Productions [MEMO ITEM] Previously reported on October Quarterly Report		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 16 / 2016	
Mailing Address 2121 Front St NE		Amount 4061.00	
City Salem	State OR	Zip Code 97301	Transaction ID : WFT2016918162-1 Date of Disbursement or Obligation MM / DD / YYYY 09 / 06 / 2016
Purpose of Expenditure TV Ad Production		Category/ Type	
Name of Federal Candidate KURT, SCHRADER, , ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 05 <input type="checkbox"/> President <input type="checkbox"/> Senate State: OR
Calendar Year-To-Date Per Election for Office Sought		154061.00	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee Political Communications Advertising [MEMO ITEM] Previously reported on October Quarterly Report		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 16 / 2016	
Mailing Address 37 West 39th St, Suite 602		Amount 150000.00	
City New York	State NY	Zip Code 10018	Transaction ID : WFT20169181628-1 Date of Disbursement or Obligation MM / DD / YYYY 09 / 16 / 2016
Purpose of Expenditure TV Ad Placement		Category/ Type	
Name of Federal Candidate KURT, SCHRADER, , ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 05 <input type="checkbox"/> President <input type="checkbox"/> Senate State: OR
Calendar Year-To-Date Per Election for Office Sought		154061.00	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	0
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	0

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gayle, Atteberry, , ,

[Electronically Filed]

Date

MM / DD / YYYY
10 / 18 / 2016

Signature